

LIST OF GRANTEES (6 Grantees)					
Grantee Name	City	State	Tracking Number	BHCMIS ID	Funding Streams
CHARLES DREW HEALTH CENTER, INC.	OMAHA	NE	H80CS004382009	072110	CH,HCH
COMMUNITY ACTION PARTNERSHIP OF WESTERN NEBRASKA	GERING	NE	H80CS003292009	073080	CH,MH
EAST-CENTRAL DISTRICT HEALTH DEPARTMENT	COLUMBUS	NE	H80CS008622009	078030	CH
NORFOLK COMMUNITY HEALTH CARE CLINIC, INC.	NORFOLK	NE	H80CS105902009	07E00059	CH
ONE WORLD COMMUNITY HEALTH CENTERS	OMAHA	NE	H80CS007372009	076290	CH
PEOPLE'S HEALTH CENTER	LINCOLN	NE	H80CS002362009	078170	CH

TABLE 3A - Patients by Age and Gender - 2009
State - Universal - 6 Grantees

Age Groups		Male Patients (a)	Female Patients (b)	All Patients
Number of Patients				
1.	Under Age 1	891	928	1,819
2.	Age 1	561	575	1,136
3.	Age 2	535	545	1,080
4.	Age 3	521	586	1,107
5.	Age 4	554	539	1,093
6.	Age 5	514	540	1,054
7.	Age 6	461	459	920
8.	Age 7	438	444	882
9.	Age 8	396	404	800
10.	Age 9	371	392	763
11.	Age 10	333	353	686
12.	Age 11	367	371	738
13.	Age 12	388	414	802
14.	Age 13	407	390	797
15.	Age 14	362	374	736
16.	Age 15	350	391	741
17.	Age 16	354	454	808
18.	Age 17	374	537	911
19.	Age 18	316	628	944
20.	Age 19	343	741	1,084
Subtotal Patients (sum lines 1-20)		8,836	10,065	18,901
21.	Age 20	424	803	1,227
22.	Age 21	402	829	1,231
23.	Age 22	418	832	1,250
24.	Age 23	397	806	1,203
25.	Age 24	423	827	1,250
26.	Ages 25 - 29	2,186	3,723	5,909
27.	Ages 30 - 34	1,832	3,001	4,833
28.	Ages 35 - 39	1,766	2,635	4,401
29.	Ages 40 - 44	1,663	2,293	3,956
30.	Ages 45 - 49	1,854	2,197	4,051
31.	Ages 50 - 54	1,533	1,848	3,381
32.	Ages 55 - 59	1,133	1,331	2,464
33.	Ages 60 - 64	660	937	1,597
Subtotal Patients (sum lines 21-33)		14,691	22,062	36,753
34.	Ages 65 - 69	381	546	927
35.	Ages 70 - 74	193	297	490
36.	Ages 75 - 79	122	222	344
37.	Ages 80 - 84	90	153	243
38.	Ages 85 and over	55	129	184
Subtotal Patients (sum lines 34-38)		841	1,347	2,188
39.	Total Patients (sum lines 1-38)	24,368	33,474	57,842
% of Total		42.1%	57.9%	

TABLE 3B - Patients by Hispanic or Latino Identity / Race / Language - 2009
State - Universal - 6 Grantees

PATIENTS BY RACE		PATIENTS BY HISPANIC OR LATINO IDENTITY						
		Hispanic/Latino (a)	Non-Hispanic/Latino (b)	Unreported/Refused to Report (c)		Total (d)		
				Number	% of Total	Number	% of Total	% of Known
Number of Patients								
1.	Asian	10	750			760	1.3%	1.7%
2a.	Native Hawaiian	1	29			30	0.1%	0.1%
2b.	Other Pacific Islander	30	33			63	0.1%	0.1%
2.	Total Hawaiian/Pacific Islander (Sum lines 2a+2b)	31	62			93	0.2%	0.2%
3.	Black/African American	19	8,819			8,838	15.3%	19.4%
4.	American Indian/Alaska native	79	493			572	1.0%	1.3%
5.	White	19,111	16,041			35,152	60.8%	77.1%
6.	More than one race	105	86			191	0.3%	0.4%
6a.	Total Known (Sum lines 1+2+3+4+5+6)	19,355	26,251			45,606		
7.	Unreported/Refused to report	4,725	475	7,036	12.2%	12,236	21.2%	
8.	Total Patients(Sum lines 1+2+3 to 7)	24,080	26,726	7,036	12.2%	57,842	100.0%	100.0%
9.	Total Patients	47.4%	52.6%					

PATIENTS BY LANGUAGE	Number (a)	% of Total
Number of Patients		
12. Patients best served in a language other than English	21,851	37.8%

% may not equal 100% due to rounding

TABLE 4 - Selected Patient Characteristics - 2009
State - Universal - 6 Grantees

Characteristic			Number of Patients (a)	% of Total	% of Known	
Income as Percent of Poverty Level						
1.	100% and Below		30,557	52.8%	62.7%	
2.	101 - 150%		12,104	20.9%	24.8%	
3.	151 - 200%		2,812	4.9%	5.8%	
4.	Over 200%		3,239	5.6%	6.6%	
5.	Unknown		9,130	15.8%		
6.	Total (sum lines 1-5)		57,842	100.0%		
Principal Third Party Medical Insurance Source		Ages 0 - 19 (a)	Ages 20+ (b)	TOTAL	%	
7.	None/Uninsured		8,536	26,709	35,245	60.9%
8a.	Regular Medicaid (Title XIX)		8,872	4,564	13,436	23.2%
8b.	CHIP Medicaid		0	0	0	0.0%
8.	Total Medicaid (Sum lines 8a+8b)		8,872	4,564	13,436	23.2%
9.	Medicare (Title XVIII)		0	2,110	2,110	3.6%
10a.	Other Public Insurance Non-CHIP		0	14	14	0.0%
10b.	Other Public Insurance CHIP		0	0	0	0.0%
10.	Total Public Insurance (Sum lines 10a+10b)		0	14	14	0.0%
11.	Private Insurance		1,493	5,544	7,037	12.2%
12.	Total (Sum Lines 7+8+9+10+11)		18,901	38,941	57,842	100.0%
Managed Care Utilization						
Payor Category		Medicaid (a)	Medicare (b)	Other Public Including Non- Medicaid CHIP (c)	Private (d)	Total (e)
13a. Capitated Member months		0	0	0	0	0
13b. Fee-for-service Member months		64,747	0	0	0	64,747
13c. Total Member Months (Sum lines 13a+13b)		64,747	0	0	0	64,747
Characteristics - Special Populations			Number of Patients (a)	%		
14. Migrant (330g grantees Only)			305	31.4%		
15. Seasonal (330g grantees Only)			190	19.5%		
Migrant/Seasonal (non-330 g grantees)			477	49.1%		
16. Total Migrant/Seasonal Agricultural Worker or Dependent (All Grantees Report This Line)			972	100.0%		
17. Homeless Shelter (330h grantees Only)			1,549	49.7%		
18. Transitional (330h grantees Only)			193	6.2%		
19. Doubling Up (330h grantees Only)			0	0.0%		
20. Street (330h grantees Only)			92	3.0%		
21. Other (330h grantees Only)			0	0.0%		
22. Unknown (330h grantees Only)			0	0.0%		
Homeless (non-330 h grantees)			1,282	41.1%		
23. Total Homeless (All Grantees Report This Line)			3,116	100.0%		
24. Total School Based Health Center Patients (All Grantees Report This Line)			0			
25. Total Veterans (All Grantees Report this Line)			298			

% may not equal 100% due to rounding

TABLE 5 - Staffing and Utilization - 2009
State - Universal - 6 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs (a)	Clinic Visits (b)	Patients (c)
1.	Family Physicians	12.24	42,911	
2.	General Practitioners	0.90	2,941	
3.	Internists	1.27	7,028	
4.	Obstetrician/Gynecologists	0.53	3,574	
5.	Pediatricians	2.85	10,209	
7.	Other Specialty Physicians	0.79	1,662	
8.	Total Physicians (Sum lines 1-7)	18.58	68,325	
9a.	Nurse Practitioners	10.42	30,117	
9b.	Physician Assistants	7.97	26,446	
10.	Certified Nurse Midwives	2.28	4,754	
10a.	Total Mid-Levels (Sum lines 9a-10)	20.67	61,317	
11.	Nurses	40.17	7,433	
12.	Other Medical Personnel	46.95		
13.	Laboratory Personnel	4.00		
14.	X-Ray Personnel	2.15		
15.	Total Medical Services (Sum lines 8+10a through 14)	132.52	137,075	46,574
16.	Dentists	11.49	28,252	
17.	Dental Hygienists	5.63	5,937	
18.	Dental Assistants, Aides, Techs	20.83		
19.	Total Dental Services (Sum lines 16-18)	37.95	34,189	15,776
20a.	Psychiatrists	0.72	2,993	
20a1.	Licensed Clinical Psychologists	1.40	1,172	
20a2.	Licensed Clinical Social Workers	0.00	0	
20b.	Other Licensed Mental Health Providers	5.88	7,829	
20c.	Other Mental Health Staff	3.24	3,104	
20.	Total Mental Health Services (Sum lines 20a-20c)	11.24	15,098	6,273
21.	Substance Abuse Services	0.09	17	13
22.	Other Professional Services	1.30	1,933	399
23.	Pharmacy Personnel	2.30		
24.	Case Managers	15.14	15,832	
25.	Patient/Community Education Specialists	9.35	9,726	
26.	Outreach Workers	3.01		
27.	Transportation Staff	4.69		
27a.	Eligibility Assistance Workers	8.09		
27b.	Interpretation Staff	17.68		
28.	Other Enabling Services	2.10		
29.	Total Enabling Services (Sum lines 24-28)	60.06	25,558	16,941
29a.	Other Programs/Services	40.84		
30a.	Management and Support Staff	39.65		
30b.	Fiscal and Billing Staff	23.95		
30c.	IT Staff	4.93		
30.	Total Administrative Staff (Sum lines 30a-30c)	68.53		
31.	Facility Staff	4.88		
32.	Patient Support Staff	77.05		
33.	Total Administrative & Facility (Sum lines 30-32)	150.46		
34.	Total (Sum lines 15+19+20+21+22+23+29+29a+33)	436.76	213,870	

Visits are shown only for personnel that generate reportable visits
Subtotals may differ from the sum of cells due to rounding

TABLE 5 - Staffing and Utilization - 2009
State - Universal - 6 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs		Visits	
		% Group	% Total	% Group	% Total
1.	Family Physicians	9.2%	2.8%	31.3%	20.1%
2.	General Practitioners	0.7%	0.2%	2.1%	1.4%
3.	Internists	1.0%	0.3%	5.1%	3.3%
4.	Obstetrician/Gynecologists	0.4%	0.1%	2.6%	1.7%
5.	Pediatricians	2.2%	0.7%	7.4%	4.8%
7.	Other Specialty Physicians	0.6%	0.2%	1.2%	0.8%
8.	Total Physicians (Sum lines 1-7)	14.0%	4.3%	49.8%	31.9%
9a.	Nurse Practitioners	7.9%	2.4%	22.0%	14.1%
9b.	Physician Assistants	6.0%	1.8%	19.3%	12.4%
10.	Certified Nurse Midwives	1.7%	0.5%	3.5%	2.2%
10a.	Total Mid-Levels (Sum lines 9a-10)	15.6%	4.7%	44.7%	28.7%
11.	Nurses	30.3%	9.2%	5.4%	3.5%
12.	Other Medical Personnel	35.4%	10.7%		
13.	Laboratory Personnel	3.0%	0.9%		
14.	X-Ray Personnel	1.6%	0.5%		
15.	Total Medical (Sum lines 8+10a through 14)	100.0%	30.3%	100.0%	64.1%
16.	Dentists	30.3%	2.6%	82.6%	13.2%
17.	Dental Hygienists	14.8%	1.3%	17.4%	2.8%
18.	Dental Assistance,Aides,Techs	54.9%	4.8%		
19.	Total Dental Services (Sum lines 16-18)	100.0%	8.7%	100.0%	16.0%
20a.	Psychiatrists	6.4%	0.2%	19.8%	1.4%
20a1.	Licensed Clinical Psychologists	12.5%	0.3%	7.8%	0.5%
20a2.	Licensed Clinical Social Workers	0.0%	0.0%	0.0%	0.0%
20b.	Other Licensed Mental Health Providers	52.3%	1.3%	51.9%	3.7%
20c.	Other Mental Health Staff	28.8%	0.7%	20.6%	1.5%
20.	Mental Health (Sum lines 20a-c)	100.0%	2.6%	100.0%	7.1%
21.	Substance Abuse Services	100.0%	0.0%	100.0%	0.0%
22.	Other Professional Services	100.0%	0.3%	100.0%	0.9%
23.	Pharmacy Personnel	100.0%	0.5%		
24.	Case Managers	25.2%	3.5%	61.9%	7.4%
25.	Patient/Community Education Specialists	15.6%	2.1%	38.1%	4.5%
26.	Outreach Workers	5.0%	0.7%		
27.	Transportation Staff	7.8%	1.1%		
27a.	Eligibility Assistance Workers	13.5%	1.9%		
27b.	Interpretation Staff	29.4%	4.0%		
28.	Other Enabling Services	3.5%	0.5%		
29.	Total Enabling Services (Sum lines 24-28)	100.0%	13.8%	100.0%	12.0%
29a.	Other Programs/Services	100.0%	9.4%		

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TABLE 5 - Staffing and Utilization - 2009
State - Universal - 6 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs		Visits	
		% Group	% Total	% Group	% Total
30a.	Management and Support Staff	26.4%	9.1%		
30b.	Fiscal and Billing Staff	15.9%	5.5%		
30c.	IT Staff	3.3%	1.1%		
30.	Total Administrative Staff (Sum lines 30a-30c)	45.5%	15.7%		
31.	Facility Staff	3.2%	1.1%		
32.	Patient Support Staff	51.2%	17.6%		
33.	Total Administrative & Facility (Sum lines 30-32)	100.0%	34.4%		
34.	Total (Sum lines 15+19+20+21+22+23+29+29a+33)		100.0%		100.0%

Clinic Visits are shown only for personnel that generate reportable visits
Subtotals may differ from the sum of cells due to rounding
% may not equal 100% due to rounding

TABLE 6A - Selected Diagnoses and Services Rendered - 2009
State - Universal - 6 Grantees

Diagnostic Category		Applicable ICD - 9 - CM Codes	Number of Visits by Primary Diagnosis (a)	Number of Patients with Primary Diagnosis (b)	Visits Per Patient
Selected Infectious and Parasitic Diseases					
1.	Symptomatic HIV	042; 079.53	179	52	3.44
2.	Asymptomatic HIV	V08	1	1	1.00
3.	Tuberculosis	010.xx - 018.xx	33	29	1.14
4.	Syphilis and other sexually transmitted diseases	090.xx - 099.xx	493	449	1.10
Selected Diseases of the Respiratory System					
5.	Asthma	493.xx	3,046	1,517	2.01
6.	Chronic bronchitis and Emphysema	490.xx - 492.xx	641	458	1.40
Selected Other Medical Conditions					
7.	Abnormal Breast Findings,Female	174.xx; 198.81; 233.0x; 238.3; 793.8x	52	38	1.37
8.	Abnormal Cervical Findings	180.xx; 198.82; 233.1x; 795.0x	378	300	1.26
9.	Diabetes Mellitus	250.xx; 648.0x; 775.1x;	10,352	3,712	2.79
10.	Heart Disease (selected)	391.xx - 392.0x 410.xx - 429.xx	1,169	697	1.68
11.	Hypertension	401.xx - 405.xx;	7,299	4,160	1.75
12.	Contact Dermatitis and other Eczema	692.xx	1,033	889	1.16
13.	Dehydration	276.5x	56	32	1.75
14.	Exposure to Heat or Cold	991.xx - 992.xx	18	9	2.00
14a.	Overweight and obesity	ICD-9 : 278.0 – 278.02 or V85.xx (Excluding V85.0, V85.1, V85.51 V85.52)	459	350	1.31
Selected Childhood Conditions					
15.	Otitis Media and Eustachian Tube Disorders	381.xx - 382.xx	2,444	1,754	1.39
16.	Selected Perinatal Medical Conditions	770.xx; 771.xx; 773.xx; 774.xx - 779.xx (Excluding 779.3x)	46	32	1.44
17.	Lack of Expected Normal Physiological Development (Such as delayed milestone;Failure to gain weight;Failure to thrive)- does not include sexual or mental development;Nutritional Deficiencies	260.xx - 269.xx; 779.3x; 783.3x - 783.4x;	136	118	1.15

TABLE 6A - Selected Diagnoses and Services Rendered - 2009
State - Universal - 6 Grantees

Diagnostic Category		Applicable ICD - 9 - CM Codes	Number of Visits by Primary Diagnosis (a)	Number of Patients with Primary Diagnosis (b)	Visits Per Patient
Selected Mental Health and Substance Abuse Conditions					
18.	Alcohol Related Disorders	291.xx; 303.xx; 305.0x; 357.5x	257	198	1.30
19.	Other Substance Related Disorders (Excludes Tobacco Use Disorders)	292.1x - 292.8x; 304.xx; 305.2x - 305.9x; 357.6x; 648.3x	212	179	1.18
19a.	Tobacco Use Disorders	305.1	336	302	1.11
20a.	Depression and Other Mood Disorders	296.xx; 300.4 301.13; 311.xx	5,960	2,479	2.40
20b.	Anxiety Disorders Including PTSD	300.0x; 300.2x; 300.3; 308.3; 309.81;	1,277	816	1.56
20c.	Attention Deficit and Disruptive Behavior Disorders	312.8x; 312.9x; 313.81; 314.xx	855	385	2.22
20d.	Other Mental Disorders, Excluding Drug or Alcohol Dependence (includes mental retardation)	290.xx; 293.xx - 302.xx (Excluding 296.xx; 300.0x; 300.2x; 300.3; 300.4; 301.13); 306.xx - 319.xx (Excluding 308.3; 309.81; 311.xx; 312.8x; 312.9x; 313.81; 314.xx)	2,299	942	2.44

TABLE 6A - Selected Diagnoses and Services Rendered - 2009
State - Universal - 6 Grantees

Service Category		Applicable ICD - 9 - CM Codes	Number of Visits (a)	Number of Patients (b)	Visits Per Patient
Selected Diagnostic Tests/Screening/Preventive Services					
21.	HIV Test	CPT - 4: 86689; 86701 - 86703; 87390 - 87391	3,146	3,062	1.03
22.	Mammogram	CPT-4: 77052, 77057 OR ICD-9: V76.11; V76.12	860	843	1.02
23.	Pap Test	CPT - 4: 88141 - 88155; 88164 - 88167; 88174 - 88175 OR ICD - 9: V72.3; V72.31; V76.2	6,835	6,238	1.10
24.	Selected Immunizations (Hepatitis A, Hemophilus Influenza B (HiB), Influenza virus, Pneumococcal Diptheria, Tetanus, Pertussis (DTaP) (DTP) (DT), Mumps, Measles, Rubella, Poliovirus, Varicella, Hepatitis B Child)	CPT - 4: 90633 - 90634, 90645 - 90648; 90669; 90696 - 90702; 90704 - 90716; 90718 - 90723; 90743 - 90744; 90748	6,826	5,296	1.29
24a.	Seasonal Flu Vaccine	CPT-4: 90655 - 90662	7,273	6,654	1.09
24b.	H1N1 Flu Vaccine	CPT-4: 90663; 90470	4,123	3,536	1.17
25.	Contraceptive Management	ICD - 9: V25.xx CPT - 4: 99391 - 99393;	5,668	2,941	1.93
26.	Health Supervision of Infant or Child (ages 0 through 11)	CPT - 4: 99381 - 99383;	10,018	5,216	1.92
26a.	Childhood lead test screening (Ages 9 to 72 months)	CPT-4: 83655	1,665	1,581	1.05
26b.	Screening, Brief Intervention, and Referral to Treatment (SBIRT)	CPT-4: 99408-99409	0	0	-
26c.	Smoke and tobacco use cessation counseling	CPT-4: 99406 and 99407; S9075	72	71	1.01

TABLE 6A - Selected Diagnoses and Services Rendered - 2009
State - Universal - 6 Grantees

Service Category		Applicable ADA Code	Number of Visits (a)	Number of Patients (b)	Visits Per Patient
Selected Dental Services					
27.	I. Emergency Services	ADA: D9110	1,118	949	1.18
28.	II. Oral Exams	ADA: D0120, D0140, D0145, D0150, D0160, D0170, D0180	14,422	12,260	1.18
29.	Prophylaxis - Adult or Child	ADA: D1110, D1120	7,130	6,256	1.14
30.	Sealants	ADA: D1351	1,673	1,338	1.25
31.	Fluoride Treatment - adult or child	ADA: D1203, D1204, D1206	4,799	4,271	1.12
32.	III. Restorative Services	ADA: D21xx - D29xx	7,192	4,632	1.55
33.	IV. Oral Surgery (Extractions and other Surgical Procedures)	ADA: D7111, D7140, D7210, D7220, D7230, D7240, D7241, D7250, D7260, D7261, D7270, D7272, D7280	4,897	3,754	1.30
34.	V. Rehabilitation Services (Endo,Perio,Prosth,Orhto)	ADA: D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	3,889	2,990	1.30

TABLE 6B - Quality of Care Indicators - 2009
State - Universal - 6 Grantees

SECTION A - AGE CATEGORIES FOR PRENATAL PATIENTS (GRANTEES WHO PROVIDE PRENATAL CARE ONLY)					
DEMOGRAPHIC CHARACTERISTICS OF PRENATAL CARE PATIENTS					
AGE		Number of Patients (a)		Percent	
1.	Less than 15 Years	3		0.2%	
2.	Ages 15 - 19	234		14.7%	
3.	Ages 20 - 24	511		32.0%	
4.	Ages 25 - 44	847		53.1%	
5.	Ages 45 and Over	1		0.1%	
6.	Total Patients (Sum lines 1-5)	1,596		100.0%	

SECTION B - TRIMESTER OF ENTRY INTO PRENATAL CARE					
Trimester of First Known Visit for Women Receiving Prenatal Care During Reporting Year		Women Having First Visit with Grantee		Women Having First Visit with Another Provider	
		(a)	%	(b)	%
7.	First Trimester	1,162	72.8%	66	4.1%
8.	Second Trimester	283	17.7%	22	1.4%
9.	Third Trimester	51	3.2%	12	0.8%

SECTION C - CHILDHOOD IMMUNIZATION RATE			
Childhood Immunization Rate		Total Number Patients with 2nd Birthday During Measurement Year (a)	Estimated number patients immunized (b)
10.	Number of children who have received required vaccines who had their 2nd birthday during measurement year	908	631

SECTION D - PAP TEST			
Pap Test		Total Number of Female Patients 24-64 Years of Age (a)	Estimated number patients tested (b)
11.	Number of female patients aged 24-64 who had at least one PAP test performed during the measurement year or during one of the previous two years	16,379	10,248

% may not equal 100% due to rounding

The childhood immunization and Pap test rates are based on the total of the estimated number of patients tested or immunized for each health center divided by the total number patients in the applicable category (i.e., the universe) for each measure.

TABLE 7 - Health Outcomes and Disparities - 2009
State - Universal - 6 Grantees

Total (i)								
HIV Positive Pregnant Women	1							
	100.0%							
Section A: DELIVERIES AND BIRTH WEIGHT								
	Prenatal care patients who delivered during the year		Deliveries performed by Grantee Provider		Live Births < 1500 grams	Live Births 1500-2499 grams	Live Births >= 2500 grams	% Low and Very Low Birth Weight
By Race								
Asian (a)	17	1.9%			1	5	11	35.3%
Native Hawaiian (b1)	0	0.0%			0	0	0	-
Pacific Islander (b2)	1	0.1%			0	0	1	0.0%
Black/ African American (c)	97	10.9%			1	21	75	22.7%
American Indian/ Alaska Native (d)	9	1.0%			0	0	8	0.0%
White (e)	203	22.9%			2	19	176	10.7%
More than one race (f)	4	0.5%			0	0	4	0.0%
Race Unreported/ Refused to Report (g)	546	61.6%			3	24	519	4.9%
Sub-total (Sum a+b1+b2+c+d+e+f+g)	877	99.0%			7	69	794	8.7%
By Hispanic/Latino Identity								
Hispanic/Latino (c1)	629	71.0%			4	34	589	6.1%
Non-Hispanic/Latino (c2)	248	28.0%			3	35	205	15.6%
Sub-total (Sum c1 + c2)	877	99.0%			7	69	794	8.7%
Unreported / Refused to Report Race and Ethnicity (h)	9	1.0%			0	1	8	11.1%
Total (i)	886	100.0%	663	100.0%	7	70	802	8.8%

* % shown are rounded to the .1% level for table display purposes; calculations are made using % to 8 decimal places

TABLE 7 - Health Outcomes and Disparities - 2009
State - Universal - 6 Grantees

SECTION B: HYPERTENSION		
Patients 18 to 85 diagnosed with hypertension whose last blood pressure was less than 140/90		
	Total hypertensive patients	Estimated % Patients with Controlled Blood Pressure
By Race		
Asian (a)	62	
Native Hawaiian (b1)	0	
Pacific Islander (b2)	8	
Black/ African American (c)	715	
American Indian/ Alaska Native (d)	56	
White (e)	3,126	
More than one race (f)	32	
Race Unreported/ Refused to Report (g)	420	
Sub-total (Sum a+b1+b2+c+d+e+f+g)	4,419	
By Hispanic/Latino Identity		
Hispanic/Latino (c1)	1,340	
Non-Hispanic/Latino (c2)	3,079	
Sub-total (Sum c1 + c2)	4,419	
Unreported / Refused to Report Race and Ethnicity (h)	99	
Total (i)	4,518	60.8%

* % shown are rounded to the .1% level for table display purposes; calculations are made using % to 8 decimal places

** % by race are low estimates, not adjusted at the grantee level for samples with zero patients in racial categories.

TABLE 7 - Health Outcomes and Disparities - 2009
State - Universal - 6 Grantees

SECTION C: DIABETES			
Patients 18 to 75 diagnosed with Type I or Type II diabetes: Most recent test results			
	Total patients with diabetes	Estimated % Patients with Hba1c <= 9%	Estimated % Patients with Hba1c < 7%
By Race			
Asian (a)	37		
Native Hawaiian (b1)	0		
Pacific Islander (b2)	4		
Black/ African American (c)	498		
American Indian/ Alaska Native (d)	49		
White (e)	1,991		
More than one race (f)	23		
Race Unreported/ Refused to Report (g)	363		
Sub-total (Sum a+b1+b2+c+d+e+f+g)	2,965		
By Hispanic/Latino Identity			
Hispanic/Latino (c1)	1,251		
Non-Hispanic/Latino (c2)	1,714		
Sub-total (Sum c1 + c2)	2,965		
Unreported / Refused to Report Race and Ethnicity (h)	59		
Total (i)	3,024	74.1%	40.1%

* % shown are rounded to the .1% level for table display purposes; calculations are made using % to 8 decimal places

** % by race are low estimates, not adjusted at the grantee level for samples with zero patients in racial categories.

TABLE 8A - Financial Costs - 2009
State - Universal - 6 Grantees

	Accrued Cost (a)	Allocation of Facility and Administration (b)	Total Cost After Allocation of Facility and Administration (c)
Financial Costs for Medical Care			
1. Medical Staff	9,866,182	5,244,256	15,110,438
2. Lab and X-ray	672,397	348,895	1,021,292
3. Medical/Other Direct	1,944,988	1,014,299	2,959,287
4. Total Medical Care Services (Sum lines 1-3)	12,483,567	6,607,450	19,091,017
Financial Costs for Other Clinical Services			
5. Dental	3,672,741	2,026,704	5,699,445
6. Mental Health	934,714	398,929	1,333,643
7. Substance Abuse	5,033	1,490	6,523
8a. Pharmacy not including pharmaceuticals	327,323	209,779	537,102
8b. Pharmaceuticals	575,120		575,120
9. Other Professional	39,602	15,715	55,317
10. Total Other Clinical Services (Sum lines 5-9)	5,554,533	2,652,617	8,207,150
Financial Costs of Enabling and Other Program Related Services			
11a. Case Management	590,659		590,659
11b. Transportation	132,398		132,398
11c. Outreach	157,105		157,105
11d. Patient and Community Education	476,935		476,935
11e. Eligibility Assistance	278,661		278,661
11f. Interpretation Services	651,848		651,848
11g. Other Enabling Services	140,505		140,505
11. Total Enabling Services Cost (Sum lines 11a-11g)	2,428,111	1,103,098	3,531,209
12. Other Related Services	2,015,700	938,314	2,954,014
13. Total Enabling and Other Services (Sum lines 11-12)	4,443,811	2,041,412	6,485,223
Overhead and Totals			
14. Facility	2,635,054		
15. Administration	8,666,425		
16. Total Overhead (Sum lines 14-15)	11,301,479		
17. Total Accrued Costs (Sum lines 4+10+13+16)	33,783,390		33,783,390
18. Value of Donated Facilities, Services and Supplies			3,348,954
19. Grand Total including Donations (Sum lines 17-18)			37,132,344

% may not equal 100% due to rounding

TABLE 8A - Financial Costs - 2009
State - Universal - 6 Grantees

Services		Direct Accrued Cost (a)		Cost (c)
		% of Category	% of Total	Includes Overhead** % of Total
Financial Costs for Medical Care				
1.	Medical Staff	79.0%	29.2%	44.7%
2.	Lab and X-ray	5.4%	2.0%	3.0%
3.	Medical/Other Direct	15.6%	5.8%	8.8%
4.	Total Medical Care Services (Sum lines 1-3)	100.0%	37.0%	56.5%
Financial Costs for Other Clinical Services				
5.	Dental	66.1%	10.9%	16.9%
6.	Mental Health	16.8%	2.8%	3.9%
7.	Substance Abuse	0.1%	0.0%	0.0%
8a.	Pharmacy not including pharmaceuticals	5.9%	1.0%	1.6%
8b.	Pharmaceuticals	10.4%	1.7%	1.7%
9.	Other Professional	0.7%	0.1%	0.2%
10.	Total Other Clinical Services (Sum lines 5-9)	100.0%	16.4%	24.3%
Financial Costs of Enabling and Other Program Related Services				
11a.	Case Management	13.3%	1.7%	1.7%
11b.	Transportation	3.0%	0.4%	0.4%
11c.	Outreach	3.5%	0.5%	0.5%
11d.	Patient and Community Education	10.7%	1.4%	1.4%
11e.	Eligibility Assistance	6.3%	0.8%	0.8%
11f.	Interpretation Services	14.7%	1.9%	1.9%
11g.	Other Enabling Services	3.2%	0.4%	0.4%
11.	Total Enabling Services Cost (Sum lines 11a-11g)	54.6%	7.2%	10.5%
12.	Other Related Services	45.4%	6.0%	8.7%
13.	Total Enabling and Other Services (Sum lines 11-12)	100.0%	13.2%	19.2%
Overhead and Totals				
14.	Facility	23.3%	7.8%	
15.	Administration	76.7%	25.7%	
16.	Total Overhead (Sum lines 14-15)	100.0%	33.5%	
17.	Total Accrued Costs (Sum lines 4+10+13+16)	100.0%	100.0%	100.0%
18.	Value of Donated Facilities, Services and Supplies (as % of direct costs - line 17)			9.9%

% may not equal 100% due to rounding

** Total Cost After Allocation of facility and Administration % of Total.

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2009
State - Universal - 6 Grantees

Payor Category		Charges			Collections			
		Full Charges This Period (a)	% of Payor	% of Total	Amount Collected This Period (b)	% of Payor	% of Total	% of Charges
1.	Medicaid Non-Managed Care	9,440,553	79.8%	31.9%	5,520,542	78.2%	42.7%	58.5%
2a.	Medicaid Managed Care (capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
2b.	Medicaid Managed Care (fee-for-service)	2,383,867	20.2%	8.0%	1,537,538	21.8%	11.9%	64.5%
3.	Total Medicaid (Sum lines 1+2a+2b)	11,824,420	100.0%	39.9%	7,058,080	100.0%	54.5%	59.7%
4.	Medicare Non-Managed Care	1,164,441	100.0%	3.9%	878,375	100.0%	6.8%	75.4%
5a.	Medicare Managed Care (capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
5b.	Medicare Managed Care (fee-for-service)	0	0.0%	0.0%	0	0.0%	0.0%	-
6.	Total Medicare (Sum lines 4+5a+5b)	1,164,441	100.0%	3.9%	878,375	100.0%	6.8%	75.4%
7.	Other Public including Non-Medicaid CHIP (Non Managed Care)	277,515	100.0%	0.9%	128,127	100.0%	1.0%	46.2%
8a.	Other Public including Non-Medicaid CHIP (Managed Care Capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
8b.	Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)	0	0.0%	0.0%	0	0.0%	0.0%	-
9.	Total Other Public (Sum lines 7+8a+8b)	277,515	100.0%	0.9%	128,127	100.0%	1.0%	46.2%
10.	Private Non-Managed Care	2,904,705	100.0%	9.8%	1,628,081	100.0%	12.6%	56.0%
11a.	Private Managed Care (Capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
11b.	Private Managed Care (fee-for-service)	0	0.0%	0.0%	0	0.0%	0.0%	-
12.	Total Private (Sum lines 10+11a+11b)	2,904,705	100.0%	9.8%	1,628,081	100.0%	12.6%	56.0%
13.	Self Pay	13,446,666	100.0%	45.4%	3,248,485	100.0%	25.1%	24.2%
14.	Grand Total (Sum lines 3+6+9+12+13)	29,617,747		100.0%	12,941,148		100.0%	43.7%

% may not equal 100% due to rounding

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2009
State - Universal - 6 Grantees

Payor Category	Retroactive Settlements, Receipts, and Paybacks (c)						Allowances	
	Collection of recon./wrap around Current Year (c1)	Collection of recon./wrap around Previous Years (c2)	Collection of other retroactive payments (c3)	Penalty/ Payback (c4)	Net Retros	Net Retros % of Charges	Allowances (d)	Allowances % of Charges
1. Medicaid Non-Managed Care	0	416,722		975	415,747	4.4%	3,528,456	37.4%
2a. Medicaid Managed Care (capitated)	0	0	0	0	0	-	0	-
2b. Medicaid Managed Care (fee-for-service)	0	150,223	0	0	150,223	6.3%	604,623	25.4%
3. Total Medicaid (Sum lines 1+2a+2b)	0	566,945	0	975	565,970	4.8%	4,133,079	35.0%
4. Medicare Non-Managed Care	0	38,100		0	38,100	3.3%	101,444	8.7%
5a. Medicare Managed Care (capitated)	0	0	0	0	0	-	0	-
5b. Medicare Managed Care (fee-for-service)	0	0	0	0	0	-	0	-
6. Total Medicare (Sum lines 4+5a+5b)	0	38,100	0	0	38,100	3.3%	101,444	8.7%
7. Other Public including Non-Medicaid CHIP (Non Managed Care)	0	0		0	0	0.0%	123,798	44.6%
8a. Other Public including Non-Medicaid CHIP (Managed Care Capitated)	0	0	0	0	0	-	0	-
8b. Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)	0	0	0	0	0	-	0	-
9. Total Other Public (Sum lines 7+8a+8b)	0	0	0	0	0	0.0%	123,798	44.6%

% may not equal 100% due to rounding

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2009
State - Universal - 6 Grantees

Payor Category		Retroactive Settlements, Receipts, and Paybacks (c)					Allowances		
		Collection of recon./wrap around Current Year (c1)	Collection of recon./wrap around Previous Years (c2)	Collection of other retroactive payments (c3)	Penalty/ Payback (c4)	Net Retros	Net Retros % of Charges	Allowances (d)	Allowances % of Charges
10.	Private Non-Managed Care				0	0	0.0%	807,488	27.8%
11a.	Private Managed Care (Capitated)			0	0	0	-	0	-
11b.	Private Managed Care (fee-for-service)			0	0	0	-	0	-
12.	Total Private (Sum lines 10+11a+11b)			0	0	0	0.0%	807,488	27.8%
13.	Self Pay								
14.	Grand Total (Sum lines 3+6+9+12+13)	0	605,045	0	975	604,070	2.0%	5,165,809	17.4%
13. Self Pay		Sliding Discounts (e)				Bad Debt Write Off (f)			
		8,166,071				2,056,537			

% may not equal 100% due to rounding

TABLE 9E -Other Revenues - 2009
State - Universal - 6 Grantees

Source	Amount (a)	% Group Total
BPHC Grants (Enter Amount Drawn Down - Consistent with PMS-272)		
1a. Migrant Health Center	216,680	2.4%
1b. Community Health Center	8,076,165	88.1%
1c. Health Care for the Homeless	652,929	7.1%
1e. Public Housing Primary Care	0	0.0%
1g. Total Health Center Cluster (Sum lines 1a through 1e)	8,945,774	97.5%
1j. Capital Improvement Program Grants	225,163	2.5%
1. Total BPHC Grants (Sum lines 1g+1h+1i+1j)	9,170,937	100.0%
Other Federal Grants		
2. Ryan White Part C HIV Early Intervention	0	0.0%
3. Other Federal Grants	96,404	7.0%
4. American Recovery and Reinvestment Act (ARRA) New Access Point (NAP) and Increased Demand for Services (IDS)	611,541	44.6%
4a. American Recovery and Reinvestment Act (ARRA) Capital Improvement Project (CIP) and Facility Investment Program (FIP)	664,000	48.4%
5. Total Other Federal Grants (Sum Lines 2-4a)	1,371,945	100.0%
Non-Federal Grants Or Contracts		
6. State Government Grants and Contracts	5,228,800	56.6%
6a. State/Local Indigent Care Programs	1,405,836	15.2%
7. Local Government Grants and Contracts	1,644,668	17.8%
8. Foundation/Private Grants and Contracts	966,585	10.5%
9. Total Non-Federal Grants Or Contracts (Sum lines 6+6a+7+8)	9,245,889	100.0%
10. Other Revenue (Non-patient related revenue not reported elsewhere)	1,310,997	100.0%
11. Grand Total Revenue (Sum lines 1+5+9+10)	21,099,768	

% may not equal 100% due to rounding